

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	
Computer Readable Form (CRF)?::	
Title::	METHODS AND COMPOSITIONS FOR TREATMENT OF AUTOIMMUNE DISEASES
Attorney Docket Number::	PEPT-P01-006
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	10
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Germany/USA
Status::	Full Capacity
Given Name::	Kai
Middle Name::	W.
Family Name::	Wucherpennig
City of Residence::	Brookline
Country of Residence::	MA
Street of mailing address::	67 Highland Road

City of mailing address:: Brookline
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02445

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: James
Family Name:: Rasmussen
City of Residence:: Cambridge
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 75 Cambridge Parkway, Unit E410
City of mailing address:: Cambridge
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02142

Applicant Authority Type:: Inventor
Primary Citizenship Country:: People's Republic of China
Status:: Full Capacity
Given Name:: Bei
Family Name:: Yu
City of Residence:: West Roxbury
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 72 Willowdean Avenue
City of mailing address:: West Roxbury
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02132

Applicant Authority Type:: Inventor
Primary Citizenship Country:: France
Status:: Full Capacity
Given Name:: Eric
Family Name:: Zanelli
City of Residence:: Sudbury
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 160 Woodside Road
City of mailing address:: Sudbury
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 01776

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jack
Middle Name:: L.
Family Name:: Strominger
City of Residence:: Cambridge
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 130 Mt. Auburn Street Apt. 405
City of mailing address:: Cambridge
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02138

Correspondence Information

Correspondence Customer Number:: 28120

Representative Information

Representative Customer Number:: 28120

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	US05/006822	03/01/05
US05/006822	An application claiming the benefit under 35 USC 119(e)	60/549409	03/01/04
US05/006822	An application claiming the benefit under 35 USC 119(e)	60/551396	03/09/04

Foreign Priority Information**Assignee Information**

Assignee name:: Peptimmune, Inc.
Street of mailing address:: 64 Sidney Street, Suite 380
City of mailing address:: Cambridge
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02139